RECEIVED-FPSC, 09 MAY 11 AM 9: 36 COMMISSION CLERK

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERS
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature Alternative Alternative
1. Article Addressed to: Telcom.Net, Inc.	D. Is delivery address different from item 1? If YES, enter delivery address below: No
1930 Harrison Street, Suite 404 Hollywood FL 33020	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
PSC-09-0297-PRA-TI CHUS-09 090132-TI	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7005 08	10 0002 3487 5889
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540